| NAO 435 (Rev. 1/90)                                                                                          |                                                | Administrative C        | d States Courts                     | FOR COURT USE ONLY DUE DATE:         |                  |             |  |
|--------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------|-------------------------------------|--------------------------------------|------------------|-------------|--|
| Pand Instruction                                                                                             | as on Pack                                     | TRAN                    | SCRIPT ORDI                         | ER                                   | DUE DATE         |             |  |
| Read Instructions on Back:  1. NAME                                                                          |                                                |                         |                                     | 2. PHONE NUMBER                      | 3. DATE          |             |  |
| 1. IVAIVIE                                                                                                   |                                                |                         |                                     | 2.THORE NOMBER                       | 3. DATE          |             |  |
| 4. MAILING ADDRESS                                                                                           |                                                |                         |                                     | 5. CITY                              | 6. STATE         | 7. ZIP CODE |  |
| 8. CASE NUMBER 9. JUDICIAL OFFICIAL 12. CASE NAME                                                            |                                                |                         |                                     | DATES OF PROCEEDINGS                 |                  |             |  |
|                                                                                                              |                                                |                         |                                     | 10. FROM                             | 11. TO           |             |  |
|                                                                                                              |                                                |                         |                                     |                                      | N OF PROCEEDINGS |             |  |
| 15. ORDER FOR                                                                                                |                                                |                         |                                     | 13. CITY                             | 14. STATE        |             |  |
| G APPEAL G CRIMINAL                                                                                          |                                                |                         | G CRIMINAL JUSTICE ACT G BANKRUPTCY |                                      |                  |             |  |
| G NON-APPEAL G CIVIL                                                                                         |                                                |                         | <b>G</b> IN FORMA PAUPERIS          | <b>G</b> OTHER (Specify)             |                  |             |  |
| 16. TRANSCRIP                                                                                                | T REQUESTED (Specif                            | y portion(s) and date(s | ) of proceeding(s) fe               | or which transcript is requested)    |                  | -           |  |
| PORTIONS                                                                                                     |                                                | DA                      | ATE(S)                              | PORTION(S)                           | DATE(S)          |             |  |
| <b>G</b> VOIR DIRE                                                                                           |                                                |                         |                                     | <b>G</b> TESTIMONY (Specify Witness) |                  |             |  |
|                                                                                                              | ΓΑΤΕΜΕΝΤ (Plaintiff)                           |                         |                                     |                                      |                  |             |  |
|                                                                                                              | TATEMENT (Defendant                            | )                       |                                     |                                      |                  |             |  |
|                                                                                                              | RGUMENT (Plaintiff)                            |                         |                                     | <b>G</b> PRE-TRIAL PROCEEDING (Spcy) |                  |             |  |
|                                                                                                              | RGUMENT (Defendant)                            |                         |                                     |                                      |                  |             |  |
| G OPINION OF                                                                                                 |                                                |                         |                                     |                                      |                  |             |  |
| G JURY INSTR                                                                                                 |                                                |                         |                                     | G OTHER (Specify)                    |                  |             |  |
| G SENTENCING                                                                                                 |                                                |                         |                                     |                                      |                  |             |  |
| <b>G</b> BAIL HEARI                                                                                          | ING                                            |                         |                                     |                                      |                  |             |  |
|                                                                                                              | ODICINIA                                       |                         |                                     | ORDER                                |                  |             |  |
| CATEGORY                                                                                                     | ORIGINAL (Includes Free Copy<br>for the Court) | y FIRST COPY            | ADDITIONAL<br>COPIES                | NO. OF PAGES ESTIMATE                |                  | COSTS       |  |
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| HOURLY                                                                                                       | G                                              | G                       | NO. OF COPIES                       |                                      |                  |             |  |
| CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional). |                                                |                         |                                     | ESTIMATE TOTAL                       |                  |             |  |
| 18. SIGNATURE                                                                                                |                                                |                         |                                     | PROCESSED BY                         | -                |             |  |
| 19. DATE                                                                                                     |                                                |                         |                                     | PHONE NUMBER                         |                  |             |  |
| TRANSCRIPT TO BE PREPARED BY                                                                                 |                                                |                         |                                     | COURT ADDRESS                        |                  |             |  |
|                                                                                                              |                                                |                         |                                     |                                      |                  |             |  |
|                                                                                                              |                                                |                         |                                     |                                      |                  |             |  |
|                                                                                                              |                                                |                         |                                     |                                      |                  |             |  |
| ORDER RECEIVED DATE BY                                                                                       |                                                |                         |                                     |                                      |                  |             |  |
| DEPOSIT PAID                                                                                                 |                                                |                         |                                     | DEPOSIT PAID                         |                  |             |  |
| TRANSCRIPT ORDERED                                                                                           |                                                |                         |                                     | TOTAL CHARGES                        |                  |             |  |
| TRANSCRIPT RE                                                                                                |                                                |                         |                                     | LESS DEPOSIT                         |                  |             |  |
| ORDERING PARTY NOTIFIED                                                                                      |                                                |                         |                                     |                                      |                  |             |  |
| TO PICK UP TRANSCRIPT                                                                                        |                                                |                         | TOTAL REFUNDED                      |                                      |                  |             |  |
| PARTY RECEIVI                                                                                                | ED TRANSCRIPT                                  |                         |                                     | TOTAL DUE                            |                  |             |  |

(Previous editions of this form may still be used)

DISTRIBUTION: COURT COPY

## INSTRUCTIONS GENERAL

**Use.** Use this form to order transcript of proceedings. Complete a separate order form for each case number for which transcript is ordered.

**Completion**. Complete Items 1-19. Do *not* complete shaded areas which are reserved for the court's use.

**Order Copy.** Keep a copy for your records.

Mailing or Delivering to the Court. Mail or deliver the original, and two copies to the Clerk of Court.

**Deposit Fee.** The court will notify you of the amount of the required deposit fee which may be mailed or delivered to the court. Upon receipt of the deposit, the court will process the order.

**Deliver Time.** Delivery time is computed from the date of receipt of the deposit fee.

**Completion of Order.** The court will notify you when the transcript is completed.

**Balance Due.** If the deposit fee was insufficient to cover all charges, the court will notify you of the balance due which must be paid prior to receiving the completed order.

## **SPECIFIC**

- Items 1-19. These items should always be completed.
- Item 8. Only one case number may be listed per order.
- Item 15. Place an "X" in each box that applies.
- Item 16. Place an "X" in the box for each portion requested. List specific date(s) of the proceedings for which transcript is requested. Be sure that the description is clearly written to facilitate processing. Orders may be placed for as few pages of transcript as are needed.
- Item. 17. Categories. Only four (4) categories of transcripts may be ordered. These are:

<u>Ordinary</u>. A transcript to be delivered within thirty (30) calendar days after receipt of an order. (Order is considered received upon receipt of the deposit.)

**Expedited**. A transcript to be delivered within seven (7) calendar days after receipt of an order.

<u>Daily</u>. A transcript to be delivered following adjournment and prior to the normal opening hour of the court on the following morning whether or not it actually is a court day.

<u>Hourly</u>. A transcript of proceedings ordered under unusual circumstances to be delivered within two (2) hours.

**NOTE**: Full price may be charged only if the transcript is delivered within the required time frame. For example, if an order for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary *delivery* rate.

Ordering. Place an "X" in each box that applies. Indicate the number of additional copies ordered.

<u>Original</u>. Original typing of the transcript. An original must be ordered and prepared prior to the availability of copies. The original fee is charged only once. The fee for the original includes the free copy for the court.

*First Copy*. First copy of the transcript after the original has been prepared. All parties ordering copies must pay this rate for the first copy ordered.

Additional Copies. All other copies of the transcript ordered by the same party.

Item 18. Sign in this space to certify that you will pay all charges. (This includes the deposit plus any additional charges.)

Item 19. Enter the date of signing.

Shaded Area. Reserved for the court's use.